

Annual Quality Assurance Summary for new schools and programmes

This summary provides an overview of how an organisation is progressing towards meeting our standards as detailed in [Promoting excellence: standards for medical education and training](#). It outlines the quality assurance activities we undertook and a summary of our findings.

Organisation	Three Counties Medical School, University of Worcester
Review period	2024/2025

Overview of findings

Overall findings statement

Three Counties Medical School (TCMS; the school) has completed the second year of a graduate entry MBChB programme based in Worcester. Our overall judgement at this stage is that we are assured, from our visits and the clarification of some points during our meetings with the school, that TCMS is appropriately working towards meeting our standards. No serious concerns were identified during this cycle.

The school submitted a Self-Assessment Questionnaire (SAQ) on 25 October 2024. A panel of GMC staff and associates scrutinised the SAQ, which covered various aspects of the school's development. An in-person visit was scheduled for 13 January 2025 and additional documentation was submitted by the school to provide context for the visit. Following the visit, the school was provided with verbal and some written feedback, as well as line by line feedback on its responses to the SAQ. Specific updates were requested in the feedback for the school to provide in its next SAQ.

An online visit on 12 August 2025 provided an opportunity for the school to update the visit team on progress against our standards. Written feedback was provided to the school through a quality assurance visit feedback report. This outlined the school's achievements within phase 1, and areas where the school should provide further information against our standards in relation to preparation for phase 2.

We are confident that the school has provided phase 1 students with a supportive learning environment to achieve the learning outcomes required by the curriculum. The school has

planned effectively, through staffing and resources, to deliver the year 3 curriculum, assessments, and Longitudinal Integrated Clerkships (LICs).

However, as detailed in the feedback, there are some areas identified that will require additional evidence during the next cycle. This includes how the LICs work in practice, how the school will ensure that student's pastoral and wellbeing need are met whilst on placements and how the school provides clinical educators with support. In addition, the school will provide detailed planning for the MLA ahead of our next visit and OSCE observation. The school must submit the compliance questionnaires for both the AKT and CPSA alongside the submission of the main SAQ. These will be scrutinised by two associates and feedback will be provided to the school.

We will also continue to seek further assurance through SAQ submissions and discussions with stakeholders to further triangulate our standards.

Promoting Excellence

	Activity	Date	Summary
1	SAQ submission	October 2024	<p>The SAQ was submitted on time and covered all five themes of <i>Promoting excellence</i>. It provided a good overview of how the school plans to meet our standards in line with its planned timelines.</p> <p>This was scrutinised by the GMC team including our education associates.</p>
2	Document submission	December 2024	<ul style="list-style-type: none"> ● Clinical skills and consent policy outlining which procedures are planned for each year and level of supervision ● Examples of PebblePad portfolios ● Risk register ● Fitness to Practise documentation ● Longitudinal Integrated Clerkship (LIC) documentation produced for educators or LEPs ● LIC clinical educator guides handbooks ● Overview of placements and where experience of different specialties sits within the programme ● List of OSCE assessors with designation ● Example of individual OSCE assessor feedback
3	Visit/SMT meeting	January 2025	<p>The visit focused on areas of the SAQ that required further clarification and exploration to provide assurance around the school's progress towards meeting our standards.</p>

			<p>During the visit we met with senior leaders and staff from Three Counties Medical School, representatives from its contingency partner, students from year 1 and 2, clinical educators and representatives from clinical placements.</p> <p>The following areas were explored in detail with the school:</p> <ul style="list-style-type: none"> ● Quality management ● Curriculum and assessment ● Placements and clinical educators ● Student support, raising concerns and fitness to practise ● Plans in place for phase 2 LICs and LIC Events. <p>We highlighted verbally the key areas that require an enhanced focus to ensure progression at the end of the visit day.</p>
4	Initial feedback proforma	January 2025	An outline of the key areas that require an enhanced focus to ensure progression verbally provided at the end of the visit day was documented and sent to the school.
5	SAQ written feedback		The GMC's line-by-line feedback in response to the school's SAQ submission. This details our review of progression against each of our standards and details additional information sought at the next submission inclusive of additional supporting documentary evidence required.
6	Virtual GMC visit	August 2025	<p>The visit focused on areas that required the school to update or give further clarification to provide assurance around the school's progress towards meeting our standards.</p> <p>During the visit we met with senior leaders and staff from Three Counties Medical School.</p> <p>The following areas were explored in detail with the school:</p> <ul style="list-style-type: none"> ● A review of the academic year ● Assessment including preparations for the MLA ● Staff and student recruitment ● Curriculum and assessment preparation for phase 2 including LICs ● LIC placements in GP settings and LIC Event opportunities in secondary care

			<ul style="list-style-type: none"> ● Student support and wellbeing during LICs
7	Quality assurance visit feedback	October 2025	<p>Detailed written feedback was provided after the visit and outlined the school's achievements within phase 1 and progress towards future preparation. Areas for further development were outlined to ensure progression.</p> <p>We were able to see that the school has planned effectively, through staffing and resources, to deliver the year three curriculum, assessments and clinical placements. In particular, the school has focused on planning for the LIC. This includes preparing GP supervisors to support students whilst in their main placement in primary care and also developing administrative systems for the planned secondary care placements, LIC Events.</p> <p>We are encouraged to hear that the school has continued to develop strong working relationships with placement providers. Processes are being developed to monitor the quality of GP and secondary care placements and provide educators with ongoing training and networking opportunities.</p> <p>There are some key areas identified that require additional evidence during the next cycle. We would be interested to hear more about how the LICs and LIC Events are working in practice and any feedback from students and clinical educators.</p> <p>In addition, we would be interested to hear more about preparations for the final year of the programme, including the AKT and CPSA.</p> <p>We will continue to seek further assurance through SAQ submissions and discussions with stakeholders to further triangulate our standards.</p>

Areas working well

We note areas where we have found that not only our standards are met, but they are well embedded in the organisation.

Number	Theme	Areas working well
1	Theme 1: Learning environment and culture (R1.5) Theme 2: Educational governance and leadership (R2.3)	Student satisfaction continues to be high within both cohorts, and students experience a sense of belonging within the school. Student feedback is valued, and changes are made promptly.
2	Theme 1: Learning environment and culture (R1.7)	Clinical Teaching Fellows at partner sites are well informed of the expectations of the TCMS curriculum and provide effective teaching opportunities.
3	Theme 2: Educational governance and leadership (R2.1; R2.8)	The school has developed new NHS partnerships to accommodate the organisation of the LICs with both GP settings and secondary care LIC Events. The school has ensured there is additional capacity for sustainability.
4	Theme 4: Supporting educators (R4.1) Theme 5: Developing and implementing curricula and assessments (R5.1)	Induction for students and educators is supportive, and the school has planned effectively for induction around the LICs.

Recommendations

We set recommendations where we have found areas for improvement related to our standards. They highlight areas an organisation should address to improve, in line with best practice.

Number	Theme	Recommendations
1	Theme 2: Educational governance and leadership (R2.4) Theme 5: Developing and implementing curricula and assessment. (R5.7)	The school should continue to reflect on its assessment strategy, and in particular preparations for the AKT and CPSA.

2	Theme 4: Supporting educators (R4.1, R4.4, R4.5)	As the school moves towards the use of LICs as clinical placements in phase 2 of the programme, it is important that GP supervisors and clinical educators who provide the LIC Events are well prepared and have access to support from the school.
3	Theme 5: Developing and implementing curricula and assessments (R5.3, R5.4)	The school should continue to consider how the LICs and LIC Events provide students with experience in a range of specialties and in different settings. In particular, how placements enable students to become members of multidisciplinary teams in secondary care, with educators able to provide reliable judgements about their abilities, performance and progress.
4	Theme 5: Developing and implementing curricula and assessments (R5.6)	The school should continue preparations for the AKT and CPSA elements of the MLA, ensuring assessments set are fair, reliable and valid allowing them to decide whether medical students have achieved the learning outcomes required for graduates.

Next steps

The school has been provided with areas within the line-by-line SAQ feedback that require additional information or focus for the school to continue to progress. The feedback proforma following our virtual visit also outlines areas where we require further information. Finally, we have provided recommendations to the school in this document. The school should review all of our feedback ahead of submitting the SAQ for 2025/6. This should be done no later than 31 October 2025. The school must also submit the compliance questionnaires for both the AKT and CPSA alongside their SAQ submission.

Once we have received the submission of the SAQ for 2025/6, we will work to review this and undertake an in-person team visit to the school in February 2026, including an observation of an OSCE, to discuss the SAQ and meet with key stakeholders. We will also conduct a review of the MLA documentation submitted to us with associates. We will advise of any additional quality assurance activities that will be required during this cycle following the visit.

Organisation's response

The organisation has the right to reply to the AQAS; if they have responded it will be included below.

Organisation's response

Thank you for your feedback. As a new school we will continue to reflect on your feedback specifically on our assessment strategy, and in particular preparations for the AKT and CPSA as our first cohort comes up to graduation.

We are minded to ensure all our educators are fully prepared and supported especially as we deliver our innovative longitudinal integrated clerkship (LIC). We also take on board your recommendations concerning future development of our LIC.